#### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 1 of 65

Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)	<u></u>		
Case number (if known)	Chapter you are filing under:		
	✓ Chapter 7		
	Chapter 11		
	Chapter 12		Check if this is an
	Chapter 13		amended filing

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Dell First name	First name
Write the name that is on your government-issued picture identification (for example, your driver's	Middle name Watson	Middle name
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you have used in the last	First name	First name
8 years		
Include your married or maiden names.	Middle name	Middle name
maluen names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- 0046	xxx - xx-
Security number or federal Individual	OR	OR
Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 2 of 65

Debtor 1 Dell First Name	Watson Middle Name Last Name	Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name	Business name
8 years Include trade names and	Business name	Business name
doing business as names	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	11325 S Emerald Ave Number Street	Number Street
	Chicago Illinois 60628 City State Zip Code	City State Zip Code
	Cook	
	County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	City State Zip Code	City State Zip Code
6. Why you are choosing this district to file for bankruptcy	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 3 of 65

Debtor 1 Dell			Case number (if kno	own)
First Name	Middle Name	Last Name		
Part 2: Tell the Court Abo	out Your Bankruptcy Ca	ase		
<ol> <li>The chapter of the Bankruptcy Code you are choosing to file under</li> </ol>		description of each, see <i>Notice Req</i> 0)). Also, go to the top of page 1 and		
8. How you will pay the fee	more details about cashier's check, or may pay with a cred Individuals to Pay 1 I request that my finding may, but is not the official poverty you choose this options.	how you may pay. Typically, if you money order. If your attorney is so dit card or check with a pre-printer ee in installments. If you choose Your Filing Fee in Installments (Coffee be waived (You may request ot required to, waive your fee, an line that applies to your family si	ou are paying the submitting your ed address. e this option, sig official Form 103 this option only and may do so only ize and you are u	
9. Have you filed for bankruptcy within the last 8 years?	Ves. District District District	When When When	MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District	<u>W</u> hen <u>W</u> hen	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11. Do you rent your residence?	✓ No. Go to  Yes. Fill ou	ord obtained an eviction judgment a line 12. at <i>Initial Statement About an Eviction</i> ankruptcy petition.		st You (Form 101A) and file it with

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 4 of 65

Debtor 1 Dell Watson Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

#### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 5 of 65

Debtor 1 Dell Watson Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. The law requires that Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 6 of 65

Debtor 1 Dell Watson Case number (if known) First Name Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Dell Watson Signature of Debtor 1 Signature of Debtor 2 4/24/2018 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 7 of 65

Debtor 1 Dell		Watson	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one  If you are not	eligibility to proceed und relief available under each	der Chapter 7, 11, 12, oh h chapter for which th	or 13 of title 11, United ne person is eligible. I a	ave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the which § 707(b)(4)(D) applies, certify that I
represented by an				ules filed with the petition is incorrect.
attorney, you do not need to file this page.	/s/ Brittney Mansfiel Signature of Attorney for		Date	4/24/2018 M / DD / YYYY
	Brittney Mansfield Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	nue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3124477849	Email address	bmansfield@semradlaw.com
	Bar number		State	

#### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 8 of 65

Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Dell		Watson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

П	Check if this is an
_	amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	<del>5</del> 0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$670.00
1c. Copy line 63, Total of all property on Schedule A/B	\$670.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	<b>#0.00</b>
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	-
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$17,527.00
Your total liabilities	\$17,527.00
art 3: Summarize Your Income and Expenses	
·	
. Schedule I: Your Income (Official Form 106I)	\$2,121.00
. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,129.00

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 9 of 65

Deb	otor 1 Dell		Watson	Case number (if known)	
	First Name	Middle Name	Last Name		
Part	4: Answer These Ques	tions for Administrat	tive and Statistical Record	s	
6. <b>A</b>	Are you filing for bankruptcy	under Chapters 7, 11, o	r 13?		
		eport on this part of the fo	orm. Check this box and submit	this form to the court with your other sche	edules.
	Yes.				
7. <b>V</b>	What kind of debt do you hav	e?			
			umer debts are those incurred by Fill out lines 8-10 for statistical pu	an individual primarily for a personal, urposes. 28 U.S.C. § 159.	
I	Your debts are not prima this form to the court with		ou have nothing to report on this	s part of the form. Check this box and sub	mit
	From the Statement of Your Form 122A-1 Line 11; OR, Fo		ne: Copy your total current montlorm 122C-1 Line 14.	hly income from Official	\$372.00
9.	Copy the following special	categories of claims fro	om Part 4, line 6 of Schedule E	E/F:	
	From Part 4 on Schedule E	/F, copy the following:		Total claim	
	9a. Domestic support obligat	ions (Copy line 6a.)		\$0.00	
	9b. Taxes and certain other of	ebts you owe the govern	ment. (Copy line 6b.)	\$0.00	
	9c. Claims for death or perso	nal injury while you were	intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line	6f.)		\$4,649.00	
	9e. Obligations arising out of priority claims. (Copy line 6g.		or divorce that you did not report	\$0.00	
	9f. Debts to pension or profit	-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00	

\$4,649.00

9g. **Total.** Add lines 9a through 9f.

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 10 of 65

Fill in this	inforn	nation to identify your o	case:			
Debtor 1		Dell		Watson		
Debtor 2		First Name	Middle N	Name Last Name		
(Spouse, if f	iling)	First Name	Middle N	Name Last Name		
United St	ates Ba	ankruptcy Court for the:	Northern	District of Illinois (State)		
Case nun	nber			(Glate)		
Officia	al Fo	orm 106A/B				Check if this is an amended filing
Sche	dule	e A/B: Prope	erty			12/1
category responsib	where le for s r name	you think it fits best. supplying correct infore and case number (if l	Be as complete a rmation. If more s known). Answer e	ist an asset only once. If an asset fits in more and accurate as possible. If two married peop space is needed, attach a separate sheet to t every question. nd, or Other Real Estate You Own or H	ole are filing together, both a this form. On the top of any a	re equally
1. Do yo	No. G	or nave any legal or el Bo to Part 2 Where is the property?	quitable interest i	in any residence, building, land, or similar pr	operty?	
1.1	Street	t address, if available, or	other description	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> <i>ims Secured by Property.</i>
				Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Numl	ber Street State	Zip Code	Land Investment property Timeshare Other	Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
				Who has an interest in the property? Check one.		mmunity property
				Debtor 1 only	Ш	
				Debtor 2 only		
				Debtor 1 and Debtor 2 only		
				At least one of the debtors and another	de Stevenson allowed a confi	
				Other information you wish to add about the property identification number:	ils item, such as local	
If you		or have more than one, I		What is the property? Check all that apply.  Single-family home	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D</i> :
	Street	t address, if available, or	other description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	ims Secured by Property.  Current value of the portion you own?
	Numl	Obs.		Land		
		ber Street		Investment property Timeshare	Describe the nature or interest (such as fee s the entireties, or a life	imple, tenancy by
	City	State	Zip Code	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about the property identification number:	Check if this is co (see instructions)	

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 11 of 65

	Dell	Watson Case r	number (if known)
	First Name	Middle Name Last Name	· · · · · · · · · · · · · · · · · · ·
_	eet address, if available, or other de	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Describe the nature of your ownership interest (such as fee simple, tenancy by
City	y State Zip (	Timeshare Other  Who has an interest in the property? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is community property (see instructions)
		Other information you wish to add about this property identification number:	item, such as local
	I the dollar value of the portion yave attached for Part 1. Write th	you own for all of your entries from Part 1, including any lat number here▶	entries for pages
o you ov ou own t . Cars, va	that someone else drives. If you lea ans, trucks, tractors, sport utility ve	rable interest in any vehicles, whether they are registered as a vehicle, also report it on Schedule G: Executory Contract whicles, motorcycles	· ·
		ancies, motorcycles	
3.1	es	Who has an interest in the property? Choone.	
	Make Model:	Who has an interest in the property? Cheone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current value of the portion you own?
	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Choone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current value of the portion you own?

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 12 of 65

otor 1			Watson	Case number	er <i>(if known)</i>	
	First Name	Middle Name	Last Name			
3.3	Make Model: Year: Approximate mileage:		Who has an interest in the one.  Debtor 1 only	property? Check	the amount of any secu	claims or exemptions. Pured claims on Schedule tims Secured by Property
	Approximate mileage.		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 o	•	entire property?	portion you own?
			At least one of the debto			· · · · · · · · · · · · · · · · · · ·
			Check if this is commu instructions)	inity property (see		
3.4	Make		Who has an interest in the	property? Check		claims or exemptions. P
	Model: Year:		one.			red claims on <i>Schedule</i> hims Secured by Property
	Approximate mileage:		Debtor 1 only			
			Debtor 2 only	1	Current value of the entire property?	Current value of the portion you own?
	Other information:		Debtor 1 and Debtor 2 o	•	—————	————
			At least one of the debto			
			Check if this is commu	inity property (see		
Exan		•	instructions) er recreational vehicles, othe t, fishing vessels, snowmobiles,	•		
Exan	nples: Boats, trailers, motors, No Yes Make	•	er recreational vehicles, othe	motorcycle accessor	Do not deduct secured	•
Exan	nples: Boats, trailers, motors, No Yes Make Model: Year:	•	er recreational vehicles, othe t, fishing vessels, snowmobiles, Who has an interest in the	motorcycle accessor	Do not deduct secured the amount of any secu	red claims on <i>Schedule</i>
Exan	nples: Boats, trailers, motors, No Yes Make Model:	•	who has an interest in the	motorcycle accessor	Do not deduct secured the amount of any secu	red claims on Schedule
Exan	nples: Boats, trailers, motors, No Yes Make Model: Year:	•	who has an interest in the one.  Debtor 1 only	motorcycle accessor property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Property
Exan	nples: Boats, trailers, motors, No Yes  Make Model: Year: Approximate mileage:	•	who has an interest in the one.  Debtor 1 only  Debtor 2 only	motorcycle accessor property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule hims Secured by Property Current value of the
Exan	nples: Boats, trailers, motors, No Yes  Make Model: Year: Approximate mileage:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o	motorcycle accessor  property? Check  nly  rs and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule hims Secured by Property Current value of the
4.1	nples: Boats, trailers, motors, No Yes  Make Model: Year: Approximate mileage:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communinstructions) Who has an interest in the	property? Check  nly rs and another  inity property (see	Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. P
4.1	nples: Boats, trailers, motors,  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communinstructions)  Who has an interest in the one.	property? Check  nly rs and another  inity property (see	Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule hims Secured by Property  Current value of the portion you own?  claims or exemptions. Pared claims on Schedule
4.1	nples: Boats, trailers, motors,  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communinstructions)  Who has an interest in the one.  Debtor 1 only	property? Check  nly rs and another  inity property (see	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications	red claims on Schedule lims Secured by Property  Current value of the portion you own?  claims or exemptions. P lired claims on Schedule lims Secured by Property
4.1	nples: Boats, trailers, motors,  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only Debtor 2 only	property? Check  nly rs and another inity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	red claims on Schedule ims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule ims Secured by Property  Current value of the
4.1	nples: Boats, trailers, motors,  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debto Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only	property? Check  nly rs and another inity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications	red claims on Schedule lims Secured by Property  Current value of the portion you own?  claims or exemptions. P lired claims on Schedule lims Secured by Property
4.1	nples: Boats, trailers, motors,  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only Debtor 2 only	property? Check  nly rs and another inity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	claims or exemptions. Prized claims on Schedule lims Secured by Property.  Current value of the

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 13 of 65

Debtor 1			Watson	Case number (if known)	
ant O	First Name	Middle Name our Personal and Household Ite	Last Name		
		e any legal or equitable interest		ms?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	_	and furnishings			
Examp No	ies: Major app	iances, furniture, linens, china, kitchen	ware		
	Describe				
	t <b>ronics</b> les: Television	s and radios; audio, video, stereo, and	digital equipment; computers, p	rinters, scanners; music	
No					7
Yes. L	Describe	Used tv, used tablet			\$150.00
		ue nd figurines; paintings, prints, or other in, or baseball card collections; other co			-
Yes. D	Describe				
Examp	les: Sports, ph	rts and hobbies otographic, exercise, and other hobby s; carpentry tools; musical instruments		, golf clubs, skis; canoes	]
<b>0. Fire</b> Examp		es, shotguns, ammunition, and related	equipment		
No					
Yes. D	Describe				
		clothes, furs, leather coats, designer we	ear, shoes, accessories		
No   Yes. [	Describe	Used clothing			0400.00
					\$100.00
2. Jew Examp	-	ewelry, costume jewelry, engagement ri r	ings, wedding rings, heirloom je	welry, watches, gems,	
	Describe	Necklace			\$100.00
	n-farm animal les: Dogs, cat	s, birds, horses			1
No	-				
Yes. D	Describe				
-	other persor	al and household items you did not	already list, including any hea	alth aids you did not list	
No Voc. F	)ooorib o				7
Yes. L	Describe				
		lue of all of your entries from Part 3 number here		es you have attached	\$350.00

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 14 of 65

Watson Debtor 1 Dell Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition \$20.00 Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$300.00 17.1. Checking account: Chase 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 15 of 65

Deb	tor 1 Dell	Middle Nove	Watson	Case number (if known)	
20.		Middle Name  orate bonds and other negotiab			
		nclude personal checks, cashiers' ents are those you cannot transfer			
	Yes. Give specific information about them	Issuer name:			
		-			
21.	Retirement or pension Examples: Interests in IF		, thrift savings accounts,	or other pension or profit-sharing plans	
	No	Type of account:	Institution name:		
	✓ Yes. List each account	401(k) or similar plan:			
	separately.	Pension plan:	Post Office Pension		\$0.00
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, public			
	Yes	Electric:			
	_	Gas:			
		Heating oil:			· 
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	_	r a periodic payment of money to	you, either for life or for a	number of years)	
	✓ No  Yes	Issuer name and description:			
		_			

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 16 of 65

Debt	or 1 Dell	Watson	Case number (if known)	
24.	First Name	Middle Name Last Name  IRA, in an account in a qualified ABLE program, or	under a qualified state tuition program	
24.	26 U.S.C. §§ 530(b)(1), 52		under a quantieu state tuition program.	
	No Institution na	ame and description. Separately file the records of any in	sterests.11 U.S.C. § 521(c):	
	Yes			
25.	Trusts, equitable or future exercisable for your bene	e interests in property (other than anything listed in fit	line 1), and rights or powers	
	<b>✓</b> No			
	Yes. Describe			
		<u> </u>		
26.		emarks, trade secrets, and other intellectual prope names, websites, proceeds from royalties and licensing		
	<b>✓</b> No			
	Yes. Describe			
27.		l other general intangibles , exclusive licenses, cooperative association holdings, lic	quor licenses, professional licenses	
	✓ No			
	Yes. Describe			
Mor	ney or property owed to	you?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ney or property owed to  Tax refunds owed to you	you?		portion you own?
		you?		portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to you	nation	Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you  No Yes. Give specific inform about them, includy you already filed the	nation ding whether ne returns	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you  No Yes. Give specific inform about them, includy you already filed the and the tax years	nation ding whether ne returns		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you  No Yes. Give specific inform about them, includy you already filed the and the tax years  Family support	nation ding whether ne returns	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific inform about them, includy you already filed the and the tax years  Family support	nation ding whether ne returns	State:  Local:  ance, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific inform about them, includy you already filed the and the tax years  Family support  Examples: Past due or lump	nation ding whether ne returns	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific inform about them, including you already filed the and the tax years  Family support Examples: Past due or lump No	nation ding whether ne returns	State:  Local:  ance, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific inform about them, including you already filed the and the tax years  Family support Examples: Past due or lump No	nation ding whether ne returns	State: Local: ance, divorce settlement, property settlementh Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific inform about them, including you already filed the and the tax years  Family support Examples: Past due or lump No	nation ding whether ne returns	State: Local:  ance, divorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00
28.	Tax refunds owed to you  No Yes. Give specific inform about them, including you already filed the and the tax years  Family support Examples: Past due or lump No	nation ding whether ne returns sum alimony, spousal support, child support, maintena	State: Local:  ance, divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you  No Yes. Give specific inform about them, include you already filed the and the tax years  Family support Examples: Past due or lump No Yes. Give specific inform Other amounts someone of	nation ding whether ne returns sum alimony, spousal support, child support, maintena	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you  No Yes. Give specific inform about them, including you already filed the and the tax years  Family support Examples: Past due or lump No Yes. Give specific inform Other amounts someone of Examples: Unpaid wages, di	nation ding whether ne returns	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you  ✓ No  Yes. Give specific inform about them, include you already filed the and the tax years  Family support  Examples: Past due or lump  ✓ No  Yes. Give specific inform  Other amounts someone of Examples: Unpaid wages, dispocial Security be	nation ding whether ne returns	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you  No Yes. Give specific inform about them, include you already filed the and the tax years  Family support  Examples: Past due or lump  No Yes. Give specific inform  Other amounts someone of Examples: Unpaid wages, disposal Security be	nation ding whether ne returns	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 17 of 65

Deb	tor 1 Dell	Watson	Case number (if known)	
	First Name Middle Name	Last Name		_
31.	Interests in insurance policies  Examples: Health, disability, or life insurance; health	alth savings account (HSA); credit, hom	eowner's, or renter's insurance	
	No  ✓ Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	Transpremier Term Life Insurance Pol	icy	\$0.00
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died.		r are currently entitled to receive	
	No			
	Yes. Describe			
33.	Claims against third parties, whether or not Examples: Accidents, employment disputes, inst		lemand for payment	
34.	Other contingent and unliquidated claims of to set off claims	every nature, including counterclai	ms of the debtor and rights	
	<b>✓</b> No			
	Yes. Describe			
35.	Any financial assets you did not already list			
	Voc Passeille			
	Yes. Describe			
36.	Add the dollar value of all of your entries from	m Part 4. including any entries for p	ages you have attached	4444
	for Part 4. Write that number here		<b>&gt;</b>	\$320.00
Part	5: Describe Any Business-Related Pro	perty You Own or Have an Inte	rest In. List any real estate in Part	1.
37.	Do you own or have any legal or equitable in	terest in any business-related prope	erty?	
	No. Go to Part 6.		po	urrent value of the ortion you own?
	Yes. Go to line 38.			not deduct secured claims exemptions
38.	Accounts receivable or commissions you alr	eady earned		
	Von Describe			
	Yes. Describe			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software	e, modems, printers, copiers, fax machi	nes, rugs, telephones, desks, chairs, electro	onic devices
	<b>✓</b> No			
	Yes. Describe			

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 18 of 65

Deb	otor 1 Dell	Watson Case number	et (if known)
40.	First Name	Middle Name Last Name equipment, supplies you use in business, and tools of your trade	
40.		squipment, supplies you use in business, and tools of your trade	
	No Yes. Describe		
	Tos. Describe		
41.	Inventory		
	<b>✓</b> No		
	Yes. Describe		
42.	Interests in partnersh	nips or joint ventures	
	<b>✓</b> No		
	Yes. Give specific	Name of entity:	of ownership:
	information about them		
	tilom		
43.	Customer lists, mailing	g lists, or other compilations	
	<b>✓</b> No		
		include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	— □ No		
	Yes. Desc	cribe	
	П		<del></del>
44.	Any business-related	property you did not already list	
	<b>✓</b> No		
	Yes. Give specific		
	information		
			<del></del>
		all of your entries from Part 5, including any entries for pages you have atta	ched
for Pa	art 5. Write that numb	er here	
Par		arm- and Commercial Fishing-Related Property You Own or Have	an Interest In.
	If you own or have ar	n interest in farmland, list it in Part 1.	
46.	Do you own or have a	any legal or equitable interest in any farm- or commercial fishing-related pr	
	No. Go to Part 7.		Current value of the portion you own?
	Yes. Go to line 47		Do not deduct secured claims
47	Farm animals		or exemptions
71.	Examples: Livestock, p	poultry, farm-raised fish	
	<b>✓</b> No		
	Yes. Describe		
	<del></del>		

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 19 of 65

Deb	tor 1 Dell First Name Middle Nam	Watson	Cas	e number <i>(if known)</i>	
40		ne Last Name			
48.	Crops-either growing or harvested				
	<b>✓</b> No				
	Yes. Describe				
49	Farm and fishing equipment, implements, r	machinery, fixtures, and t	ools of trade		
	_	,,	00.00.000		
	✓ No				
	Yes. Describe				
50.	Farm and fishing supplies, chemicals, and	feed			
	<b>✓</b> No				
	Yes. Describe				
	_				
E 1	Any farm- and commercial fishing-related p	aranarty vou did not alrea	dy liet		
31.	—	property you did not alrea	idy iist		
	✓ No				
	Yes. Describe				
4	dd tha dallan allan af all af an anaith a fan a	B. I.O. C. I. P			
	dd the dollar value of all of your entries from art 6. Write that number here			ive attached	
<b>&gt;</b>				L	
	<u></u>				
Part	7: Describe All Property You Own or	Have an Interest in Th	at You Did Not Lis	t Above	
53.	Do you have other property of any kind you				
	Examples: Season tickets, country club member	ership			
	✓ No				
	Yes. Give specific information				
	inomation				
				•	
54. A	dd the dollar value of all of your entries from	Part 7. Write that number	er here		
Part	8: List the Totals of Each Part of this	Form			
55.1	Part 1: Total real estate, line 2				<del></del>
56 1	part 2 total vehicles, line 5				
1	art 3: Total personal and household items, I	ine 15	20		
		\$350.0	JU		
58.F	art 4: Total financial assets, line 36	\$320.0	00		
59. I	Part 5: Total business-related property, line	45			
60. I	Part 6: Total farm- and fishing-related prope	rty, line 52			
61	Part 7: Total other property not listed, line 5	4			
62.	Total personal property. Add lines 56 through	61 <u>\$670.</u> 0	00	Convenerand near anti-tatal	+ \$670.00
				Copy personal property total	
					\$670.00
63. <b>T</b>	otal of all property on Schedule A/B. Add line	e 55 + line 62			

		Case 18-119			:ntered 04 ige 20 of 6	./24/18 13:19:5 85	4 Desc Main	
Fill	in this inforr	mation to identify your o	ase:					
Deb	otor 1	Dell		Watson				
Deb	otor 2	First Name	Middle Name	Last Name				
(Spc	ouse, if filing)	First Name	Middle Name	Last Name				
Uni	ted States B	ankruptcy Court for the:	Northern	District of Illinois				
	se number			(State)				
(If Kn	nown)						Check if this is	an
Of	fficial I	Form 106C					amended filing	
Sc	hedule	C: The Prop	erty You Claim	as Exempt	t		04/	16
info as e	rmation. U exempt. If r	Jsing the property yo nore space is needed	u listed on <i>Schedule A</i>	<i>B: Property</i> (Offici nis page as many o	al Form 106 <i>A</i>	VB) as your source,	ole for supplying correct list the property that you clain e as necessary. On the top of ar	
stat the tax- und	te a specif amount o exempt re ler a law t	ic dollar amount as f any applicable sta etirement funds—m hat limits the exemp	exempt. Alternatively, tutory limit. Some exer ay be unlimited in dolla	you may claim th mptions—such as ar amount. Howe llar amount and th	e full fair ma those for he ver, if you cla	rket value of the pealth aids, rights to aim an exemption o	m. One way of doing so is to property being exempted up to receive certain benefits, and of 100% of fair market value rmined to exceed that amour	
Par	rt 1: Iden	tify the Property You	ı Claim as Exempt					
1.		•	claiming? Check one only			pu.		1
	<u> </u>	•	ederal nonbankruptcy exe	·	§ 522(b)(3)			
	_	-	emptions. 11 U.S.C. § 522	. , , ,	!	ala		
2.	For any pi	roperty you list on Sche	edule A/B that you claim a	as exempt, fill in the	information b	elow.		

Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$300.00 description: lacksquare\$300.00 Checking account, 100% of fair market value, up to any Chase applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(a) \$100.00 description: **~** \$100.00 **Used clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) **✓** No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 21 of 65

Watson Debtor 1 Dell Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$150.00 description:  $\checkmark$ \$150.00 Used tv, used tablet 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 07 735 ILCS 5/12-1001(b) \$100.00 description: **✓** \$100.00 Necklace 100% of fair market value, up to any Line from applicable statutory limit 12 Schedule A/B: Brief 735 ILCS 5/12-1001(b) description: \$20.00 **✓** \$20.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 Brief 735 ILCS 5/12-1006 \$0.00 description:  $\overline{}$ \$0 Pension plan, Post 100% of fair market value, up to any Office Pension applicable statutory limit Line from Schedule A/B: 21 735 ILCS 5/12-1001(f) Brief \$0.00 description:

\$0

100% of fair market value, up to any

applicable statutory limit

Transpremier Term Life

31

**Insurance Policy** 

Line from Schedule A/B:

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 22 of 65

Fill in t	this inforr	mation to identify your c	ase:				
Debto	r 1	Dell		Watson			
		First Name	Middle Name	Last Name			
Debto							
(Spouse	e, if filing)	First Name	Middle Name	Last Name			
United	States B	ankruptcy Court for the:	Northern	District of Illinois			
0				(State)			
(If know	number n)						
Offi	cial I	Form 106D					Check if this is an amended filing
Sch	nedu	le D: Credit	ors Who Ha	ve Claims Secure	ed by Prop	erty	12/15
more s	pace is r			e are filing together, both are equ nber the entries, and attach it to t			
1. D	o any c	reditors have claims s	secured by your proper	ty?			
Ī,	No. C	heck this box and sub-	mit this form to the court	with your other schedules. You hav	e nothing else to repo	rt on this form.	
Ī	Yes. I	Fill in all of the information	on below.				
Part 1	: List A	All Secured Claims					
fc	or each cla	aim. If more than one cre		red claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 23 of 65

Fill in this infor					
	mation to identify your case	e:			
Debtor 1	Dell		Watson		
	First Name	Middle Name	Last Name		
Debtor 2	E: AN			_	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the: $N$	lorthern	District of Illinois	_	
Case number			(State)		
(If known)				-	
Official F	orm 106E/F				Check if this is an amended filing
Sched	ule E/F: Cred	litors Who	Have Unsecui	red Claims	12/15
other party to Form 106A/B) claims that are	any executory contracts of and on Schedule G: Execu e listed in Schedule D: Cred	r unexpired leases that tory Contracts and Une ditors Who Hold Claims	expired Leases (Official Form secured by Property. If more	list executory contracts on S 106G). Do not include any crespace is needed, copy the F	chedule A/B: Property (Official editors with partially secured Part you need, fill it out, number
known).	he boxes on the left. Attac			any additional pages, write	your name and case number (if
known). Part 1: List		Insecured Claims		any additional pages, write	your name and case number (if
Part 1: List  1. Do any c	All of Your PRIORITY L	Insecured Claims		any additional pages, write	your name and case number (ii
Part 1: List  1. Do any c	All of Your PRIORITY L	Insecured Claims		any additional pages, write	your name and case number (if

Total

claim

Priority

amount

Nonpriority

amount

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 24 of 65

Debt	or 1	Dell First Name Middle Name	Watson Last Name	Case number (if known)	
Part	2:	List All of Your NONPRIORITY Unsecured Cla			
		any creditors have nonpriority unsecured claims agai No. You have nothing to report in this part. Submit the Yes.	nst you?	ne court with your other schedules.	
	unse If m	ecured claim, list the creditor separately for each claim. Fo	r each claim	er of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou	ncluded in Part 1. It the Continuation
4.4	٨٦	TG CREDIT			Total claim
4.1	No	onpriority Creditor's Name		Last 4 digits of account number 3166	\$611.00
	_	700 W CORTLAND ST STE 2 umber Street		When was the debt incurred? 6/2016	
	_			As of the date you file, the claim is: Check all that apply.	
	CI	HICAGO Illinois 60622		Contingent	
		ity State Zip Code		Unliquidated	
	W	/ho incurred the debt? Check one.  Debtor 1 only		Disputed	
	Ė	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	H	Debtor 1 and Debtor 2 only		Student loans	
	F	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	F	☐ Check if this claim relates to a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	∟ Is	the claim subject to offset?		001 Collection; Collecting for	
	~	No		ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA	
		Yes			
4.2	_	AP1/MNRDS		Last 4 digits of account number 3264	\$2,069.00
		onpriority Creditor's Name 0 CHRISTIANA RD		When was the debt incurred? 6/2011	
	Νι	umber Street		As of the date you file, the claim is: Check all that apply.	
	_			Contingent	
	_	EW CASTLE Delaware 19720 ity State Zip Code		Unliquidated	
		/ho incurred the debt? Check one.		Disputed	
	~	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
		Debtor 2 only		Student loans	
		Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or	
	L	At least one of the debtors and another		divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	Ļ	Check if this claim relates to a community debt		debts  Other Specify  CraditCord	
	IS	the claim subject to offset? No		Other. Specify CreditCard	
	Ľ	Yes			
4.3	CI	BNA			\$950.00
4.0	No	onpriority Creditor's Name		Last 4 digits of account number 1512	Ψ330.00
	_	o Box 6497 umber Street		When was the debt incurred? 6/2010	
	_			As of the date you file, the claim is: Check all that apply.  Contingent	
	Si	ioux Falls South Dakota 57117		Unliquidated	
	Ci	•		Disputed	
	V	/ho incurred the debt? Check one.  Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Ē	Debtor 2 only		Student loans	
	Ē	Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or	
	F	At least one of the debtors and another		divorce that you did not report as priority claims	
	F	Check if this claim relates to a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	ls	the claim subject to offset?		Other. Specify CreditCard	
	~	<b>/</b> No		_	
		7 Vaa			

#### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 25 of 65

Debtor 1 Dell Watson Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ComEd \$600.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 3 Lincoln Center Street Number As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt V Other. Specify \_ Unpaid Bill Is the claim subject to offset? No  $\overline{\mathbf{A}}$ ☐ Yes CREDIT ACCEPTANCE \$6,053.00 3811 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/2014 PO BOX 513 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Southfield Michigan 48037 City Disputed Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify 060 Automobile  $\overline{\mathbf{v}}$ Is the claim subject to offset? **✓** No Yes I C SYSTEM INC \$217.00 4.6 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5/2014 PO BOX 64378 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL 55164 Minnesota Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another

**✓** No

Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

**V** 

Other. Specify \_

Debts to pension or profit-sharing plans, and other similar

001 Collection; Collecting for

ORIGINAL CREDITOR: ATT U-

**VERSE** 

#### Entered 04/24/18 13:19:54 Desc Main Case 18-11913 Doc 1 Filed 04/24/18 Page 26 of 65 Document

Debtor 1 Dell Watson Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Ingall's Hospital \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a One Ingalls Drive Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60426 Harvey Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Unpaid Medical V Is the claim subject to offset? No Yes 4.8 Nicor Gas \$600.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 0632 Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Aurora Illinois 60507 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Unpaid Bill V Is the claim subject to offset? **✓** No Yes **ONEMAIN** \$778.00 4.9 Last 4 digits of account number 9987 Nonpriority Creditor's Name When was the debt incurred? 10/2014 PO BOX 1010 Number As of the date you file, the claim is: Check all that apply. Contingent **EVANSVILLE** Indiana 47706 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or

No I✓I Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts

✓

Other. Specify

divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar

042 InstallmentLoan

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 27 of 65

Debtor 1 Dell Watson Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 US DEPT OF ED/GLELSI \$4,649.00 Last 4 digits of account number 8581 Nonpriority Creditor's Name 2401 INTÉRNATIONAL LN When was the debt incurred? 10/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON Wisconsin 53704 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 28 of 65

Debtor 1 Dell Watson Case number (if known)

FIRST INAL	ne Middle Name Last Name				
Part 4: Add th	e Amounts for Each Type of Unsecured Claim				
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	tatistical reporting purposes only	y. 28 U.S.C. §159.	
			Total claims		
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00		
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00		
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00		
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00		
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00		
			Total claims		
Total claims from Part 2	6f. Student loans	6f.	\$4,649.00		
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00		
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00		
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$12,878.00		
	6j. Total. Add lines 6f through 6i.	6j.	\$17,527.00		

Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 29 of 65

Et a Ni a N
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Northern District of Illinois (State)

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 30 of 65

			Do	cument Page 3	0 of 65
Fill in	this infor	mation to identify your ca	se:		
Debto	r 1	Dell		Watson	
<b>.</b>	•	First Name	Middle Name	Last Name	
Debto (Spouse	r 2 e, if filing)	First Name	Middle Name	Last Name	<del></del>
United	l States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	_
Case I	number n)			(State)	
					Check if this is an amended filing
Offi	cial	Form 106H			9
		e H: Your Cod	ohtore		12/15
					mplete and accurate as possible. If two married people are
the en	tries in t ). Answe Do you	he boxes on the left. Atta er every question. have any codebtors? (If y	ach the Additional Page	-	ce is needed, copy the Additional Page, fill it out, and number f any Additional Pages, write your name and case number (if codebtor.)
	☐ No				
2.				roperty state or territory? co, Texas, Washington, and \	Community property states and territories include Arizona, Nisconsin.)
	✓ No	o. Go to line 3.			
	Ye	- · · · · ·	er spouse, or legal equiv	valent live with you at the tir	me?
		No Yes. In which commun	ity state or territory did y	ou live?	Fill in the name and current address of that person.
		Name of your spouse, fo	rmer spouse, or legal equi	ivalent	_
		Number Street			_
		City	State	Zip Code	_
3.	again a	s a codebtor only if that	person is a guarantor or	cosigner. Make sure you h	your spouse is filing with you. List the person shown in line 2 nave listed the creditor on Schedule D (Official Form 106D), dule D, Schedule E/F, or Schedule G to fill out Column 2.
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the debt  Check all schedules that apply:
3.1	Makas	Dannia			
2.1	Mahan, Name	Denuis			Schedule D, line

60459

Zip Code

7708 Major Ave

Illinois

State

Street

Number

Burbank

City

Schedule E/F, line 4.1

Schedule G, line \_

**✓** 

Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 31 of 65

Fill in this information to identif	y your case:					
Debtor 1 Dell		Watso	on			
First Name	Middle Name	Last N			neck if this is:	
Debtor 2	<b>NA</b> : 1 11 N				An amended filing	
(Spouse, if filing) First Name	Middle Name	Last N	Name		j –	tition abantou t
United States Bankruptcy Court fo	r <u>Northern</u>	_ District of III		-	A supplement showing post-pe expenses as of the following da	
the: Case number		(3	State)			
(lf known)					MM / DD / YYYY	
Official Form 106I						
Schedule I: Your II	ncome					12/
responsible for supplying correinformation about your spouse spouse. If more space is needenumber (if known). Answer ever Part 1: Describe Employment	. If you are separated an ed, attach a separate she ery question.	d your spou	se is ı	not filing with you, do	not include information abo	out your
Fill in your employment		Debtor 1	1		Debtor 2	
information.	Employment status		al			
If you have more than one job, attach a separate page with	zmproymont status	Emplo	nploye	ad	Employed  Not Employed	
information about additional		V Not E	проус	<del>,</del>	Not Employed	
employers.	Occupation					
Include part time, seasonal, or self-employed work.	Employer's name					
	Employer's address					
Occupation may include student or homemaker, if it applies.		Number St	reet		Number Street	
		City		State Zip Code	City State	Zip Code
	How long employed there?					
Part 2: Give Details About	Monthly Income					
Part 2: Give Details About	Monthly Income					
Estimate monthly income as o spouse unless you are separated		<b>n.</b> If you have	nothin	ng to report for any line,	write \$0 in the space. Include yo	our non-filing
If you or your non-filing spouse hamore space, attach a separate sh		, combine the	inform	nation for all employers		v. If you need
				For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, so deductions.) If not paid month be.	• .		2.	\$0.00		
3. Estimate and list monthly ov	ertime pay.		3.	+ \$0.00		
4. Calculate gross income. Add	l line 2 + line 3.		4.	\$0.00		

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 32 of 65

Deb	otor 1Dell First Name		Watson Last Name		Case numbe	r <i>(if</i>		
	riist name	Middle Name	Last Name		known) For Debtor 1	For Debtor 2 or non-filing spouse		
C	opy line 4 here		→	4.	\$0.00			
5. <b>Li</b>	st all payroll deduction							
5	a. Tax, Medicare, and	Social Security deductions	;	5a.	\$0.00			
5	b. Mandatory contribu	itions for retirement plans		5b.	\$0.00			
5	c. Voluntary contributi	ions for retirement plans		5c.	\$0.00			
5	d. Required repaymen	ts of retirement fund loans		5d.	\$0.00			
5	e. Insurance			5e.	\$0.00			
5	f. Domestic support of	oligations		5f.	\$0.00			
5	g. <b>Union dues</b>			5g.	\$0.00			
5	h. Other deductions. S	Specify:		5h. +	\$0.00 +			
6. <b>A</b> ( +5h.		ons. Add lines 5a + 5b + 5c + 5d + 5e +5	f + 5g (	6.	\$0.00			
7. <b>C</b> a	alculate total monthly	take-home pay. Subtract line 6 from line	e 4.	7.	\$0.00			
8. <b>Li</b>	st all other income reg	gularly received:						
8	business, profession	·						
		r each property and business showing lry and necessary business expenses, and	i					
	the total monthly net	income.	8	Ва.	\$0.00			
8	b. Interest and dividen	nds	8	3b.	\$0.00			
8	dependent regularly							
		usal support, child support, maintenance, nd property settlement.		Вс.	\$0.00			
8	d. Unemployment com	pensation	8	Bd.	\$0.00			
8	e. Social Security		8	Ве.	\$1,749.00			
8	Include cash assistant cash assistance that y	ssistance that you regularly receive ce and the value (if known) of any non- ou receive, such as food stamps (benefits tal Nutrition Assistance Program) or		Bf.	\$0.0 <u>0</u>			
8	g. Pension or retireme	ent income	8	3g.	\$372.00			
8	h. Other monthly inco	me. Specify:		3h. +	\$0.00 +			
9. <b>A</b>	dd all other income Ad	Id lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h. 9	9.	\$2,121.00			
	Calculate monthly inco add the entries in line 10	<b>me.</b> Add line 7 + line 9. for Debtor 1 and Debtor 2 or non-filing s <sub>1</sub>		10.	\$2,121.00 +		=	\$2,121.00
Ir fr	nclude contributions fror iends or relatives.	contributions to the expenses that your an unmarried partner, members of your ants already included in lines 2-10 or amo	r household	d, your c	lependents, your roomr	•		
s	specify:						11. +	\$0.00
		last column of line 10 to the amount i Summary of Schedules and Statistical Su					12.	\$2,121.00
								Combined monthly income
13.	No.	ease or decrease within the year after	you file th	is form?	?			
	Yes. Explain:							

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 33 of 65

		D00	cument Page 33 of 6	5	
Fill in this infor	mation to identify your	case:			
Debtor 1	Dell		Watson		
D. I	First Name	Middle Name	Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filin	g
United States B	ankruptcy Court for the	: Northern	District of Illinois		owing post-petition chapter 13
	. ,		(State)	expenses as of the	ne following date:
Case number (If known)				MM / DD / YYYY	
Official	Form 106J				
Schedul	e J: Your Exp	enses			12/15
(if known). Ans	more space is needed, wer every question. cribe Your Househo		iis form. On the top of any additio	nal pages, write your na	ime and case number
1. Is this a join	nt case?				
✓ No. Go	to line 2				
Yes. Do	oes Debtor 2 live in a s	eparate household?			
	No				
	Yes. Debtor 2 must f	ile Official Forms 106J-2, Exp	penses for Separate Household of De	btor 2.	
2. Do you have	e dependents?	No			
Do not list D Debtor 2.		es. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	enses include f people other	No			
than		⁄es			
yourself and dependents	ı youi				
Part 2: Estir	nate Your Ongoing	Monthly Expenses			
	f a date after the bank		s you are using this form as a sup upplemental Schedule J, check tl		=
		cash government assistanc it on <i>Schedule I: Your Incon</i>			Your expenses
	or home ownership ex or the ground or lot. 4.	xpenses for your residence.	Include first mortgage payments an	d	<b>\$100.00</b>
If not incl	uded in line 4:				
4a. Real es	state taxes				4a <b>\$0.00</b>

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 34 of 65

 Debtor 1 First Name
 Dell Matson
 Case number (if known)

 Last Name
 Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           5. Utilities:         6a. Electricity, heat, natural gas         6a.         \$0.00           6b. Water, sever, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, internet, satellite, and cable services         6c.         \$0.00           6c. Telephone, cell phone, internet, satellite, and cable services         6c.         \$0.00           6c. Other, Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$175.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, Sundry, and dry cleaning         9.         \$25.00           10. Personal care products and services         11.         \$35.00           11. Medical and dental expenses         11.         \$35.00           12. Transportation, include gas, maintenance, bus or train fave.         12.         \$0.00           Do not include car payments         14.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Health insurance         15a         \$0.00           15. Whicke insurance         15a         \$0.00           15. Verifice insurance	First Name	Middle Name Last Name		
Security				Your expenses
6a. Electricity, heat, natural gas         6a.         \$0.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, old phone, internet, satellities, and cable services         6c.         \$20.00           6d. Other. Specify:         6d         \$0.00           7. Food and housekeeping supplies         7.         \$175.00           8. Childcare and children's education costs         9.         \$25.00           10. Personal care products and services         10.         \$25.00           11. Medical and dental expenses         11.         \$35.00           11. Medical and dental expenses         11.         \$35.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$0.00           Do not include acr payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Instrationment, clubs, recreation, newspapers, magazines, and books         15.         \$0.00           15. Instration insurance         15.         \$0.00           15. Instration include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           15. Weine insurance         15.         \$0.00           15. Weine insurance. Specify:         15.         \$0.00	5. Additional mortgage paym	nents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$20.00           6d. Other, Specity:         7.         \$175.00           7. Food and housekceping supplies         7.         \$175.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$25.00           10. Personal care products and services         10.         \$25.00           11. Medical and dental expenses         11.         \$35.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$0.00           10. Do not include gar payments         13.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a.         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00	6. Utilities:			
6c. Telephone, cell phone, Intermet, satellite, and cable services         6c.         \$20.00           6d. Other, Specilly:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$175.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$25.00           10. Personal care products and services         10.         \$25.00           11. Medical and dental expenses         11.         \$35.00           12. Transportation. Include gas, maintenance, bus or Irain fare.         12.         \$0.00           Do not include care payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           Do not include insurance deducted from your pay or included in lines 4 or 20.         15c.         \$0.00           15a. Life insurance         15b.         \$0.00           15b. Health insurance         15c.         \$0.00           15c. Vehicle insurance         15c.         \$0.00           15c. Vehicle insurance.         \$0.00         \$0.00           15c. Vehicle insurance.         \$0.00         \$0.00           15c. Vehicle insurance	6a. Electricity, heat, natural of	gas	6a.	\$0.00
6d. Other. Specify:         6d         \$0.00           7. Food and housekeeping supplies         7.         \$175.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$25.00           10. Personal care products and services         10.         \$25.00           11. Medical and dental expenses         11.         \$35.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$0.00           Do not include car payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           15. Insurance.         15.         \$0.00           Do not include insurance deducted from your pay or included in lines 4 or 20.         \$0.00         \$0.00           15a. Life insurance         15a         \$0.00           15b. Health insurance         15b         \$0.00           15c. Vehicle insurance         15c         \$0.00           15c. Vehicle insurance         15c         \$0.00           15c. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17. Installment or lease payments:         17a         \$0.00           17a. C	6b. Water, sewer, garbage c	ollection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$175.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$25.00           10. Personal care products and services         10.         \$25.00           11. Medical and dental expenses         11.         \$35.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15s         \$0.00           15. Insurance.         15s         \$0.00           15b. Health insurance deducted from your pay or included in lines 4 or 20.         15s         \$0.00           15c. Vehicle insurance.         15s         \$0.00           15c. Vehicle insurance. Specify:         15c         \$0.00	6c. Telephone, cell phone, I	nternet, satellite, and cable services	6c.	\$20.00
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10. Personal care products and services       10.       \$25.00         11. Medical and dental expenses       11.       \$35.00         12. Transportation. Include gas, maintenance, bus or train fare.       12.       \$0.00         Do not include car payments       12.       \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       15a. Life insurance deducted from your pay or included in lines 4 or 20.       15b. bealth insurance       15b.       \$0.00         15b. Health insurance       15c. Vehicle insurance       15c.       \$0.00         15c. Vehicle insurance       15c.       \$0.00         15c. Vehicle insurance. Specify:       15c.       \$0.00         15c. Vehicle insurance.       15c.       \$0.00         15c. Vehicle insurance. Specify:       15c.       \$0.00         15c. Vehicle insurance.       15c.       \$0.00         15c. Vehicle insurance	8. Childcare and children's e	ducation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$33.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.       12.       \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a.       \$0.00         15b. Health insurance       15c.       \$0.00         15c. Vehicle insurance       15c.       \$0.00         15c. Vehicle insurance.       15c.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         17c. Installment or lease payments.       17	9. Clothing, laundry, and dry	cleaning	9.	\$25.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$0.00 not include car payments   13.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.     15a.   Life insurance   15a   \$0.00     15b.   Health insurance   15b   \$0.00     15c.   Vehicle insurance   15c   \$0.00     15d.   Chare insurance   \$0.00     15d.   Chare insurance   \$0.00     15d.   Chares. Do not include taxes deducted from your pay or included in lines 4 or 20.     Specify:	10. Personal care products a	and services	10.	\$25.00
Do not include car payments   13.   13.   13.   13.   13.   13.   13.   13.   13.   13.   14.   14.   14.   15.   14.   15.   15.   14.   15.	11. Medical and dental exper	nses	11.	\$35.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       0 not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a \$0.00         15b. Health insurance       15b \$0.00         15c. Vehicle insurance       15c \$0.00         15c. Vehicle insurance. Specify:       15d \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       5pecify:         Specify:       16         17. Installment or lease payments:       17a \$0.00         17b. Car payments for Vehicle 1       17a \$0.00         17c. Other. Specify:       17c \$0.00         17c. Other. Specify:       17c \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       5pecify:       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a \$0.00         20b. Real estate taxes.       20b \$0.00         20c. Property, homeowner's, or renter's insurance       20c \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d \$0.00	-		12.	\$0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. S0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. S0.00 17c. Other. Specify: 17c. S0.00 17d. Other. Specify: 17d. S0.00 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20a. S0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses.	13. Entertainment, clubs, red	creation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance   15a   \$0.00 15b. Health insurance   15b   \$0.00 15c. Vehicle insurance   15c   \$0.00 15c. Vehicle insurance   15c   \$0.00 15d. Other insurance. Specify:   15d   \$0.00 15d. Other insurance. Specify:   16   \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:   16   \$0.00 17c. Installment or lease payments:   17a   \$0.00 17b. Car payments for Vehicle 1   17a   \$0.00 17c. Other. Specify:   17c   \$0.00 17d. Other. Specify:   17d   \$0.00 17d. Other. Specify:   17d   \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 108I).   18. 19. Other payments you make to support others who do not live with you. Specify:   19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property   20a   \$0.00 20b. Real estate taxes.   20b   \$0.00 20c. Property, homeowner's, or renter's insurance   20c   \$0.00 20d. Maintenance, repair, and upkeep expenses.   20d   \$0.00	14. Charitable contributions	and religious donations	14.	\$0.00
15b. Health insurance   15b   \$0.00     15c. Vehicle insurance   15c   \$0.00     15d. Other insurance. Specify:		educted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:	15c. Vehicle insurance		15c	\$0.00
Specify:	15d. Other insurance. Speci	ify:	15d	\$0.00
17.   Installment or lease payments:   17a.   Car payments for Vehicle 1   17a   \$0.00   17b.   Car payments for Vehicle 2   17b   \$0.00   17c.   Other.   Specify:   17c   \$0.00   17d.   Other.   Specify:   17d   \$0.00   18.   Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18.   19.   Other payments you make to support others who do not live with you.   Specify:   19.   \$0.00   20.   Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00   20b.   Real estate taxes.   20b   \$0.00   20c.   Property, homeowner's, or renter's insurance   20c.   \$0.00   20d.   Maintenance, repair, and upkeep expenses.   20d.   \$0.00   \$0.00   20d.   Maintenance, repair, and upkeep expenses.   20d.   \$0.00   \$0.00   20d.   Maintenance, repair, and upkeep expenses.   20d.   \$0.00   \$0.00   20d.   Maintenance, repair, and upkeep expenses.   20d.   \$0.00   \$0.00   20d.   \$0.00   20d.   \$0.00   20d.   \$0.00   20d.   \$0.00   \$0.00   20d.   \$0.00   20d.				
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. S0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2  17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b. So.00  20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17. Installment or lease payn	nents:		
17c. Other. Specify:	17a. Car payments for Vehic	cle 1	17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehic	cle 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
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20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00		uses not included in lines 4 or 5 of this form or on Schedule I: Your Income	19.	\$0.00
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20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	20b. Real estate taxes.			
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20c. Property, homeowner's	s, or renter's insurance		<del></del> -
	20d. Maintenance, repair, ar	nd upkeep expenses.		
	20e. Homeowner's associat	ion or condominium dues		

## Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 35 of 65

#### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 36 of 65

Debtor 1	Dell	Watson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

#### Official Form 106Dec

#### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below				
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?				
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and			
	that they are true and correct.				
X	/s/ Dell Watson	<b>x</b>			
	Signature of Debtor 1	Signature of Debtor 2			
	Date 4/24/2018	Date			
	MM/DD/YYYY	MM/DD/YYYY			

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 37 of 65

	s information to						
Debtor 1	Dell			Watson			
	First Na	ıme	Middle N	lame Last Nam	е		
Debtor 2 (Spouse, if		ıme	Middle N	lame Last Nam	<u>e</u>		
United S	States Bankrupto	y Court for the:	Northern	District of Illino	is		
Case nu	mber			(Stat	e)		
(If known)	_						Chook if this is
Offic	ial Forn	า 107					Check if this is amended filing
State	ment of	Financia	al Affairs fo	or Individuals	Filing for Bank	ruptcy	04
nforma		pace is need	ed, attach a sepa		together, both are equa . On the top of any add		
	•	-		and Where You Lived	Before		
1. W	hat is your cur	rent marital s	tatus?				
_							
	Married						
L	Married Not married						
	Not married	years, have y	ou lived anywhere	other than where you liv	ve now?		
2. Du	Not married	years, have y	ou lived anywhere	other than where you liv	ve now?		
 2. Du 	Not married uring the last 3			other than where you liv 3 years. Do not include v			
2. Du	Not married uring the last 3						
 2. Di 	Not married uring the last 3						Dates Debtor 2 lived there
	Not married  When the last 3  No  Yes. List all 6			3 years. Do not include v	where you live now.		
	Not married  When the last 3  No  Yes. List all 6	of the places y		3 years. Do not include v  Dates Debtor 1 lived there	where you live now.  Debtor 2:		there Same as Debtor 1
	Not married uring the last 3 No Yes. List all 6 Debtor 1:	of the places y		3 years. Do not include v  Dates Debtor 1 lived there	where you live now.  Debtor 2:		there  Same as Debtor 1  From
	Not married uring the last 3 No Yes. List all 6 Debtor 1:  14445 Avalo Number Stre	of the places y	ou lived in the last	3 years. Do not include v  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1		there Same as Debtor 1
	Not married uring the last 3 No Yes. List all 6 Debtor 1:	of the places y		3 years. Do not include v  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1	Zip Code	there  Same as Debtor 1  From
	Not married  No Yes. List all of Debtor 1:  14445 Avalo Number Streen	of the places y	ou lived in the last	3 years. Do not include v  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1  Number Street	Zip Code	there  Same as Debtor 1  From
	Not married  Wring the last 3  No  Yes. List all 6  Debtor 1:  14445 Avalo Number Stree  Dolton City	n et Illinois State	ou lived in the last	3 years. Do not include v  Dates Debtor 1 lived there	Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1	Zip Code	there  Same as Debtor 1  From To
2. Di	Not married  No Yes. List all of Debtor 1:  14445 Avalo Number Streen	n et Illinois State	ou lived in the last	3 years. Do not include v  Dates Debtor 1 lived there  From To	Debtor 2:  Same as Debtor 1  Number Street  City State	Zip Code	there  Same as Debtor 1  From To  Same as Debtor 1
2. Di	Not married  Wring the last 3  No  Yes. List all 6  Debtor 1:  14445 Avalo Number Stree  Dolton City	n et Illinois State	ou lived in the last	3 years. Do not include v  Dates Debtor 1 lived there  From To	Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1	Zip Code Zip Code	there  Same as Debtor 1  From To  Same as Debtor 1  From From

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 38 of 65

Debtor 1 Dell Watson Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages. Wages. For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016 ) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions exclusions) and exclusions) \$6,996.00 Est SSI From January 1 of current year until Est Pension \$1,528.00 the date you filed for bankruptcy: Est SSI \$20,988.00 For last calendar year: Est Pension \$4,584.00 (January 1 to December 31, 2017 YYYY \$20,988.00 Est SSI For the calendar year before that: Est Pension \$4.584.00 (January 1 to December 31, 2016

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 39 of 65

Debtor 1 Dell Watson Case number (if known) First Name Middle Name Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 40 of 65

or 1	Dell				tson	Case number	(if known)
	First Name		Middle Name	Last	Name		
nsio corp ager	ders include your rela orations of which yo	tives; any u are an c a busines:	general partners officer, director, p s you operate as	relatives of any gerson in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? rou are a general partner; g securities; and any managing domestic support obligations,
<b>✓</b>	No Voc. List all paymen	nto to on	inaidar				
	Yes. List all paymer	nis io an	insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City Sta	ate	Zip Code				
	Insider's Name						
	Number Street						
	City Sta	ate	Zip Code				
insio Inclu	nin 1 year before yo der? ude payments on deb No Yes. List all paymer	ots guaran	teed or cosigned	by an insider.	Total amount	Amount you	n account of a debt that benefited an  Reason for this payment
				payment	paid	still owe	Include creditor's name
	Insider's Name						
	Number Street						
	City Sta	ate	Zip Code				
	Insider's Name						
	Number Street						
	City Sta	nto.	Zin Code				

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 41 of 65

Debtor 1 Dell Watson Case number (if known) First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property 14445 Avalon, Dolton, IL 60419 \$0 Wells Fargo Creditor's Name Explain what happened Po Box 5058 Number Street Property was repossessed. Property was foreclosed. 97208 Portland Oregon Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 42 of 65

Debt	otor 1 Dell	Watson	Case number (if known)	
	First Name Middle Name	Last Name		
11.	Within 90 days before you filed for bankruptcy, dic accounts or refuse to make a payment because yo		ank or financial institution, set off any amo	unts from your
	✓ No ☐ Yes. Fill in the details.			
		Describe the action the	e creditor took Date action was taken	Amount
	Creditor's Name			
	Number Street			
	-	Last 4 digits of account	number: XXXX-	
	City State Zip Code			
12.	Within 1 year before you filed for bankruptcy, was appointed receiver, a custodian, or another officia		possession of an assignee for the benefit of	creditors, a court-
	☑ No Voc			
Part	Yes t 5: List Certain Gifts and Contributions			
ı aıı	Lot doi tain ditto and doi a ibadono			
13.	Within 2 years before you filed for bankruptcy, did	d you give any gifts with a to	otal value of more than \$600 per person?	
	No Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift	- -		
	Number Street	-		
	City State Zip Code	-		
	Person's relationship to you			
	Person to Whom You Gave the Gift			
	Number Street	-		
	City State Zip Code Person's relationship to you	•		

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 43 of 65

ebtor 1	Dell		Watson Case nu	mber (if known)	
	First Name	Middle Name	Last Name		
4. Wit	hin 2 years before you filed	for bankruptcy, did	you give any gifts or contributions with a t	otal value of more than \$6	00 to any charity?
	No				
⊻					
П	Yes. Fill in the details for ea	ach gift or contribution	on.		
	Gifts or contributions to c	harities	Describe what you contributed	Date you	Value
	that total more than \$600		besombe what you contributed	contributed	Value
	that total more than \$600			Contributed	
	Charity's Name				
	-				
	Number Ctreet				
	Number Street				
	0::	7: 0 1			
	City State	Zip Code			
rt 6:	List Certain Losses				
gan	nbling?	or bankruptcy or sir	ice you filed for bankruptcy, did you lose ar	nything because of theft, fi	re, other disaster, or
⊻	No				
П	Yes. Fill in the details.				
	Describe the property you	lost and	Describe any insurance coverage for t	he loss Date of you	r Value of property
	how the loss occurred	iost unu	Include the amount that insurance has pa		lost
			pending insurance claims on line 33 of So		
			A/B: Property.		
					<del>-</del>
	List Certain Payments of	Tuamafana			
	No				
✓	Yes. Fill in the details.				
			Description and value of any property	Date payme	nt Amount of
			transferred	or transfer	payment
				was made	payment
	Semrad Law Firm			4/24/2018	payment
	Person Who Was Paid		Attorney's Fee - 0 00	7/27/2010	
	11101 S. Western Avenue		Attorney's Fee - 0.00		\$0.00
	Number Street		Attorney's Fee - 0.00		
		_	Attorney's Fee - 0.00		
	Tumbo. Guodi		Attomey's Fee - 0.00		
			Attomey's Fee - 0.00		
		60640	Attomey's Fee - 0.00		
	Chicago Illinois	60643	Attomey's Fee - 0.00		
		60643 Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State		Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address		Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None	Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address	Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym	Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None	Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym  Person Who Was Paid	Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym	Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym  Person Who Was Paid	Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym  Person Who Was Paid	Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym  Person Who Was Paid  Number Street	Zip Code ent, if Not You	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym  Person Who Was Paid	Zip Code	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym  Person Who Was Paid  Number Street  City State	Zip Code ent, if Not You	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym  Person Who Was Paid  Number Street	Zip Code ent, if Not You	Attomey's Fee - 0.00		
	Chicago Illinois City State  Email or website address None Person Who Made the Paym  Person Who Was Paid  Number Street  City State	Zip Code ent, if Not You Zip Code	Attomey's Fee - 0.00		

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 44 of 65

Debto	or 1 Dell	Watson Case	number (if known)	
	First Name Middle Name	Last Name		
	Within 1 year before you filed for bankruptcy, did y help you deal with your creditors or to make paym Do not include any payment or transfer that you listed  No	nents to your creditors?	pay or transfer any property to anyo	ne who promised to
	Yes. Fill in the details.			
	res. Fill In the details.			
		Description and value of any proper transferred	ty Date Ar payment or transfer was made	nount of payment
	Person Who Was Paid	-	<u> </u>	
	Number Street			
	City State Zip Code	-		
	✓ No  Yes. Fill in the details.	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person Who Received Transfer	-	in exchange	
	Number Street	-		
	City State Zip Code Person's relationship to you			
	Person Who Received Transfer			
	Number Street			
	27.0.1	· ·		
	City State Zip Code Person's relationship to you			
	Within 10 years before you filed for bankruptcy, dibeneficiary? (These are often called asset-protection devices.)	d you transfer any property to a self-set	tled trust or similar device of which y	ou are a
	✓ No ✓ Yes. Fill in the details.			
		Description and value of the prope	erty transferred	Date transfer was made
	Name of trust			

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 45 of 65

Watson Debtor 1 Dell Case number (if known) Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 46 of 65

Debtor 1 Dell Watson Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 47 of 65

Deb	tor 1				Watson	Ca	ase number <i>(i</i>	f known)	
		First Name	<u> </u>	Middle Name	Last Name				
26.	Hav	e you been a party	y in any judici	al or administr	rative proceeding u	nder any environme	ental law? In	nclude settlements and ord	ers.
		No Yes. Fill in the det	ails.						
					Court or agency		Nature	of the case	Status of the case
		Case title			Court Name		-		Pending
		Case number			NumberStreet		-		On appeal
					City State	e Zip Code	-		Concluded
Pari	11:	Give Details Ab	oout Your B	usiness or Co	onnections to Any	/ Business			
27.	Witl	nin 4 years before	you filed for b	ankruptcy, dic	l you own a busines	s or have any of the	e following o	connections to any busines	s?
					ade, profession, or o LC) or limited liabilit	=	-	part-time	
		A partner in a		iity Company (L		ly partifiers lip (LLF)	)		
		_			ve of a corporation equity securities of a	corporation			
	<b>✓</b>	No. None of the a		· ·		·			
		Yes. Check all that	at apply abov	e and fill in the	details below for ea	ich business.			
					Describe the	nature of the busin	ness	Employer Identification include Social Security	
		Business Name						EIN:	
		Number Street			Nome of some	ountant or bookkee	nor .	Dates business existed	
		City	State	Zip Code	—	Juntant of Bookkee	spei	From To	
					Describe the	nature of the busin	ness	Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			Name of occ	ountant or bookkee	ner	Dates business existed	
		City	State	Zip Code	—	Juntant of Bookkee	spei	From To	
					Describe the	nature of the busin	ness	Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			Name of occ	ountant or books	ner	Dates business existed	
		City	State	Zip Code	— Hame of acco	ountant or bookkee	,pei	From To	

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 48 of 65

Deb	otor 1	Dell		Watson	Case number (if known)
		First Name	Middle Name	Last Name	
28.		ditors, or other parties.		give a financial statement to	o anyone about your business? Include all financial institutions,
		No Yes. Fill in the details b	pelow.		
				Date issued	
				MM/DD/YYYY	
		Name		MIM/DD/YYYY	
		Number Street			
		City Sta	ate Zip Code		
Par	t 12:	Sign Below			
	true a	and correct. I understa kruptcy case can resul	nd that making a false state It in fines up to \$250,000, or	ment, concealing property, d	, and I declare under penalty of perjury that the answers are probtaining money or property by fraud in connection with ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ Dell V Signature of			Signature of Debtor 2
		oignature or	Debtor 1		Date
		Date 4/24/2	2018		Date
	Did y	ou attach additional pa	ges to Your Statement of Fi	nancial Affairs for Individuals	s Filing for Bankruptcy (Official Form 107)?
	N	No			
	Y	/es			
	Did y	ou pay or agree to pay	someone who is not an attor	ney to help you fill out bank	ruptcy forms?
	V N	No			
	Ϊ,	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,
	_				Declaration and Cianature (Official Form 110)

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 49 of 65

Fill in this information to identify your case:					
Debtor 1	Dell	Watson			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois		
			(State)		
Case number (If known)	-			—	

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.						
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?				
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.				
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.				
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.				
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	No. Yes.				

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 50 of 65

Debtor	Dell		Watson	Case number (if	
1	First Name	Middle Name	Last Name	known)	-
Part 2:	List Your Unexpired I	Personal Property Leas	es		
For any informa	unexpired personal prop tion below. Do not list re	erty lease that you listed in	n Schedule G: Executor I leases are leases that	ry Contracts and Unexpired Leases (Official Form 106G), fill in the t are still in effect; the lease period has not yet ended. You may 1 U.S.C. § 365(p)(2).	
Des	scribe your unexpired per	sonal property leases		Will the lease be assumed?	
Les	sor's name:			□ No □ Yes	
	cription of leased perty:			<b>–</b>	
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:			_	
Les	sor's name:			□ No □ Yes	
	scription of leased perty:				
Les	sor's name:			□ No □ Yes	
	scription of leased perty:				
Les	sor's name:			No Yes	
	scription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Part 3:	Sign Below				
Unde			my intention about any	y property of my estate that secures a debt and any personal	_
	/s/ Dell Watson		_ *_		
Si	gnature of Debtor 1		Się	ignature of Debtor 2	
Da	ate 4/24/2018		Da	ate	
	MM/DD/YYYY			MM/DD/YYYY	

Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Page 51 of 65 Document

B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

		Northern Distric	ct of Illinois	
ı re	Dell Watson		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATIO	N OF ATTORNEY F	OR DEBTOR
1.	<ul> <li>Pursuant to 11 U.S.C. § 329(a) and I compensation paid to me within one rendered or to be rendered on behalf</li> </ul>	year before the filing of the p	petition in bankruptcy, or agreed to	o be paid to me, for services
	For legal services, I have agreed to a	ccept		\$1,765.00
	Prior to the filing of this statement I	have received		\$0.00
	Balance Due			\$1,765.00
2	. The source of the compensation pai	d to me was:		
	<b>✓</b> Debtor	Other (specify)		
3	. The source of the compensation pai	d to me is:		
	<b>✓</b> Debtor	Other (specify)		
4	I have not agreed to share the atmembers and associates of my l		with any other person unless the	ey are
		w firm. A copy of the agreeme	h a other person or persons who nt, together with a list of the nam	
5	. In return for the above-disclosed fee	, I have agreed to render legal	service for all aspects of the bank	kruptcy case, including:
	<ul> <li>a. Analysis of the debtor's finar bankruptcy;</li> </ul>	ncial situation, and rendering	advice to the debtor in determinin	ng whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statemen	nts of affairs and plan which may l	be required;
	c. Representation of the debtor	at the meeting of creditors ar	nd confirmation hearing, and any	adjourned hearings thereof;
6	. By agreement with the debtor(s), the	above-disclosed fee does no	t include the following services:	
		CERTIFICA	ATION	
	certify that the foregoing is a comple tor(s) in this bankruptcy proceedings.	te statement of any agreemen	t or arrangement for payment to r	me for representation of the
	4/24/2018		/s/ Brittney Mansfield	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1.717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 56 of 65

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Watson, Dell	Case No	
	Debtor(s)		
		Chapter.	Chapter7
	VERIFICA	ATION OF CREDITOR MAT	RIX
Th knowledge	ne above named Debtors hereby verify t e.	that the attached list of creditors is tru	ue and correct to the best of their
Date:	4/24/2018	/s/ Watson, Dell Watson, Dell Signature of Deb	tor

CREDIT ACCEPTANCE c/o: Keith Shindler 1990 E Algonquin Ste 180 Schaumburg, IL, 60173

US DEPT OF ED/GLELSI 2401 Internal Lane Attn: Chhengre Lim Madison, WI, 53704

CAP1/MNRDS 90 CHRISTIANA RD NEW CASTLE, DE, 19720

CBNA Po Box 6497 Sioux Falls, SD, 57117

ONEMAIN PO BOX 1010 EVANSVILLE, IN, 47706

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO, IL, 60622

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

ComEd 1919 Swift Drive Oak Brook, IL, 60523

Nicor Gas Po Box 549 Aurora, IL, 60507

Ingall's Hospital 19550 Governors Hwy Flossmoor, IL, 60422

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1765.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00 Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments:

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 04/24/2018

Client

Client

Attorney

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 60 of 65

Debtor 1 Dell First Name	Middle Name Last N		umber (if known)	
	estions for Reporting Purposes	laine		
16. What kind of debts do you have?	16a. Are your debts primarily cor "incurred by an individual pring No. Go to line 16b.  ☑ Yes. Go to line 17.  16b. Are your debts primarily bus money for a business or investing No. Go to line 16c.  ☐ Yes. Go to line 17.  16c. State the type of debts you o	marily for a personal, family siness debts? <i>Business de</i> stment or through the ope	y, or household purpos ebts are debts that you ration of the business o	incurred to obtain or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No. I am not filing under Chapter  ✓ Yes. I am filing under Chapter 7. I expenses are paid that fund  ✓ No.  ☐ Yes.	Do you estimate that after any		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	50,0	01-50,000 01-100,000 e than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50	million	0,000,001-\$1 billion 00,000,001-\$10 billion 000,000,001-\$50 billion e than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50	million	0,000,001-\$1 billion 00,000,001-\$10 billion ,000,000,001-\$50 billion e than \$50 billion
Part 7: Sign Below	I be a second and the second and	-11		diam municipality to a soul
For you	I have examined this petition, and correct.  If I have chosen to file under Chap of title 11, United States Code. I under Chapter 7.  If no attorney represents me and I out this document, I have obtained I request relief in accordance with I understand making a false statem connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 151	ter 7, I am aware that I may nderstand the relief availab did not pay or agree to pay d and read the notice requi the chapter of title 11, Uni nent, concealing property, e can result in fines up to \$	r proceed, if eligible, un ple under each chapter, r someone who is not a red by 11 U.S.C. § 342 ted States Code, specific or obtaining money or \$250,000, or imprisonm	and I choose to proceed an attorney to help me fill (b). fied in this petition. property by fraud in
	Executed on 4/24/2018 MM / DD / Y	<del>YYY</del>	Executed onMM	1 / DD / YYYY

### Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 61 of 65

Fill in this information to identify your case:						
Debtor 1	Dell		Watson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Northern District of Illinois						
Case number (If known)			(State)	_		

#### Official Form 106Dec

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Sign Below						
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
<b>☑</b> No						
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
Under penalty of perjury I declare that I have read the summ	ary and schedules filed with this declaration and					
that they are true and correct.	×					
Signature of Debtor 1	Signature of Debtor 2					
Date 4/24/2018	Date					
MM/DD/YYYY	MM/DD/YYYY					

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 62 of 65

Debtor	1 Dell	Watson	Case number (if known)			
	First Name Middle N	lame Last Name				
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial instit creditors, or other parties.						
	No Yes. Fill in the details below.					
		Date issu	ed			
	Name	MM/DD/YY	Y			
	Number Street					
	City State Zi	p Code				
Part 1	2: Sign Below					
tru	e and correct. I understand that making	g a false statement, conce	ny attachments, and I declare under penalty of perjury that the answers are aling property, or obtaining money or property by fraud in connection with nt for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
	Signature of Debtor 1		Signature of Debtor 2			
	Date 4/24/2018		Date			
Dic	l you attach additional pages to Your S	tatement of Financial Affa	rs for Individuals Filing for Bankruptcy (Official Form 107)?			
<b>✓</b>	No	*				
	Yes					
Dic	d you pay or agree to pay someone who	is not an attorney to help	you fill out bankruptcy forms?			
V	No					
	Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).			

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 63 of 65

ebtor	Dell		Watson	Case number (if
	First Name	Middle Name	Last Name	known)
rt 2:	List Your Unexpire	ed Personal Property Lease	s	
formati	on below. Do not lis		leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Desc	ribe your unexpired	personal property leases		Will the lease be assumed?
Less	or's name:			□ No □ Yes
Desc	ription of leased erty:			<del></del>
Less	or's name:			□ No □ Yes
Desc	ription of leased erty:			
Less	or's name:			□ No □ Yes
Desc	ription of leased erty:			
Less	or's name:			□ No □ Yes
Desc	cription of leased erty:			
Less	or's name:			□ No □ Yes
Desc	cription of leased erty:			
Less	or's name:			□ No □ Yes
Desc	cription of leased erty:			
Less	or's name:			☐ No ☐ Yes
	cription of leased erty:			
art 3:	Sign Below			
Unde	r penalty of perjury,	I declare that I have indicated in	my intention about an	y property of my estate that secures a debt and any personal
		$\mathcal{V}$		
_	s/ Dell Watson	J	. <b>*</b>	ignature of Debter 2
Sig	nature of Debtor 1	×	S	ignature of Debtor 2
Da	tte 4/24/2018 MM/DD/YYYY		D	ateMM/DD/YYYY

Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 64 of 65

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Watson, Dell	Case No	
-	Debtor(s)	0430 110.	
		Chapter.	Chapter7
	VERIFICA	ATION OF CREDITOR MAT	RIX
nowled	The above named Debtors hereby verify tige.	hat the attached list of creditors is tr	rue and correct to the best of their
oate:	4/24/2018	/s/ Watson, Dell	Du
-		Watson, Dell Signature of De.	btor

# Case 18-11913 Doc 1 Filed 04/24/18 Entered 04/24/18 13:19:54 Desc Main Document Page 65 of 65

Debtor 1 Dell First Name	Middle Name	Watson Last Name	Case number (if	known)	
, ac tame	inidale Hane	East Name	Column A Debtor 1	Column B Debtor 2 or non-filing s	
8. Unemployment compensation Do not enter the amount if you under the Social Security Act. In	contend that the amount re		\$0.00		
For your spouse	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$1,749.00 \$0.00			
9.Pension or retirement income benefit under the Social Security		unt received that was a	\$372.00		
10.Income from all other source amount. Do not include any ber payments received as a victim o international or domestic terroris page and put the total below.	nefits received under the So f a war crime, a crime agair	ocial Security Act or est humanity, or			
Total amounts from separate pa	ges, if any.		+\$0.00	+	
11. Calculate your total current		es 2 through 10 for	\$372.00	+	= \$372.00
each column. Then add the total for	r Column A to the total for	Column B.	\$072.00		
Determine Whether	the Maone Test Appli	aa ta Vau			Total current monthly income
Part 2: Determine Whether	and the same of the same of the same of	- Maria Barrana de Caracteria			
<ol> <li>Calculate your current mont</li> <li>Copy your total current mont</li> </ol>	7.5			Copy line 11 here →	\$372.00
Multiply by 12 (the number 12b. The result is your annual in		orm			X 12
TED. THE ISSUE IS YOUR AIMOUR II					\$4,464.00
13 Calculate the median family i	ncome that applies to yo	ou. Follow these steps:			
Fill in the state in which you live		Illinois			
Fill in the number of people in y	our household.				
Fill in the median family income household.	for your state and size of	W.C. C.			13. \$52,410.00
To find a list of applicable media instructions for this form. This li					
14. How do the lines compare?					
14a. Line 12b is less than of Go to Part 3.	or equal to line 13. On the	top of page 1, check box	1, There is no presumptio	n of abuse.	
14b. Line 12b is more than Go to Part 3 and fill o		ge 1, check box 2, The pr	esumption of abuse is dete	ermined by Form 12	22A-2.
Part 3: Sign Below					
By signing here, I declare unde	er penalty of perjury that th	e information on this state	ement and in any attachme	ents is true and corre	ect.
🗴 /s/ Dell Watson	r	×			
Signature of Debtor 1		<del></del>	Signature of Debtor 2		
Date 4/24/2018 MM/DD/YYYY			Date 4/24/2018 MM/DD/YYYY		
If you checked line 14a, do If you checked line 14b, fill o					